

**California Department of Education  
Migrant Education Regional Program Application**

**2004-2005  
(Year 3)**

**REGION (Number):** \_\_\_\_\_

**NAME OF LOCAL EDUCATION AGENCY (L.E.A.):** \_\_\_\_\_

**General Information**

Upon completion of this application, submit the original and two copies to:

**California Department of Education  
Learning Support and Partnership Division  
Migrant, Indian and International Education Office  
1430 N. Street, Suite 6408  
Sacramento, California 95814**

Questions regarding the development and submission of this application should be directed to the designated consultant in the CDE Migrant, Indian and International Education Office.

# MIGRANT EDUCATION REGIONAL APPLICATION

## *Signature Page*

(Please check all applicable boxes)

Regional Number:	Local Education Agency (LEA):	Project Duration: From: July 1, 2003- June 30, 2004
Contact Person:	Title:	Telephone:
Address Street:	City:	Zip: County:
<input type="checkbox"/> Original Application  <input type="checkbox"/> Amendment ( <i>changes total</i> )  <input type="checkbox"/> Revision ( <i>no change in total</i> )		Regular: \$ _____ Summer /Intersession: \$ _____ <b>Total Budget: \$ _____</b> Do not included M.E.E.S budget

Certification: *I hereby certify that all applicable state and federal rules and regulations will be observed to the best of my knowledge, the information contained in this application is correct and complete; and that the 2003/2004 assurances are accepted as the basic conditions in the operation of this project/ program for local participation and assistance.*

Superintendent (LEA) or Designee:

Position:

Date:

Migrant Education Regional Director or Designee:

Position:

Date:

Budget information has been provided to: Regional Business Office:

Migrant Education District Parent Advisory Council (PAC): *The undersigned representative certifies that the parent advisory council has had active involvement in the planning, development and review of this application. (CA Ed. Code 54444.4 (4) NCLB Section 1304(c)(A).*

**Signature of District Advisory Council President or Executive Board Officer shall sign application or designate Vice President or other executive officer. In the absence of officers, a majority (50% + 1 PAC membership) shall vote a designated signatory member. Documentation of vote must be provided along with the application.**

PAC Signature:

Title:

Date::

**MIGRANT EDUCATION PROGRAM  
REGIONAL DEMOGRAPHIC PROFILE  
PART 2**

**[Note:** *The information that is requested below needs to be provided **ONLY** for schools in your region where **MEP funds are used in a schoolwide program**. Please note that the IIUSP/PI column is optional. Duplicate this form as needed.]*

Region: \_\_\_\_\_

	School Name	District	Short School ID	* SW	** MSW	*** IIUSP/PI
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

**\*SW=Schoolwide Program** (Mark Y/N (Yes/No) if school has Schoolwide Programs)) **\*\*MSW= Migrant Schoolwide Programs** (Mark Y/N (Yes/No) if school has Schoolwide Programs which combine migrant funds) **\*\*\* IIUSP/PI = Mark Y/N** (Yes/No) if the school is an identified IIUSP school or a Program Improvement (PI) school.

## REGIONAL MIGRANT EDUCATION PROGRAM

### STAFFING PROFILE

Job Classification	Regular Term	% Migrant Funded	% Funded by Other Programs	Identify Other Programs	Multi Funded Record Keeping Process (e.g., work logs, timesheets, etc.)	Summer/Intersession
Administration (non-clerical)						
Teachers (certificated but not bilingual certified)						
Bilingual Teachers (certificated for Bilingual Instruction/ESL)						
Teachers Aide/Paraprofessional						
Support Services Staff (non-clerical)						
Support Services Staff (clerical)						
Recruiters						
Records Transfer						
Counselors						
Linker/Advocates						

## THEME 1: STANDARDS AND ASSESSMENTS

*Based on a **summary of the reported results and analysis of districts' student data**, state and **prioritize the needs of migrant students** in the region. **Include information on the number and percentage of high school graduates in the region.***

<b>1.</b> <b>Summary of Districts' Migrant Student Data</b> <i>(from Districts' Service Agreements)</i>	<b>2.</b> <b>Analysis of Summary</b> <i>( from Column 1)</i>	<b>3.</b> <b>Migrant Students Needs</b> <i>(from Column 2)</i> Using the criteria for Priority for Service

## THEME 2: TEACHING AND LEARNING

### Migrant Education Services

Year 3 (July 1, 2004 – June 30, 2005) Regular Year MEP Services					
2003-2004 Evaluation (Year 2)			Revisions for the 2004-2005 Plan (Year 3)		
2003-2004 Objectives	Met?		Accomplishments/Progress made/Need for change	Revised Objectives/New Objectives	Activities/Intended Participants/Timelines
	Ye s	No			

## THEME 2: TEACHING AND LEARNING

### Migrant Education Services

Year 3 (July 1, 2004 – June 30, 2005) Summer/Intersession MEP Services					
2003-2004 Evaluation (Year 2)			Revisions for the 2004-2005 Plan (Year 3)		
2003-2004 Objectives	Met?		Accomplishments/Progress made/Need for change	Revised Objectives/New Objectives	Activities/Intended Participants/Timelines
	Yes	No			

### THEME 3: PROFESSIONAL DEVELOPMENT

Year 3 (July 1, 2004 – June 30, 2005) Regular Year MEP Services					
2003-2004 Evaluation (Year 2)			Revisions for the 2004-2005 Plan (Year 3)		
2003-2004 Activities	Met?		Accomplishments/Progress made/Need for change	Revised Objectives/New Objectives	Activities/Intended Participants/Timelines
	Yes	No			



## THEME 4: LINKS AMONG SCHOOLS, FAMILIES, AND COMMUNITIES

### Migrant Parent Involvement

Year 3 (July 1, 2004 – June 30, 2005)					
2003-2004 Evaluation (Year 2)			Revisions for the 2004-2005 Plan (Year 3)		
2003-2004 Objectives	Met?		Accomplishments/Progress made/Need for Change	Revised Objectives/New Objectives	Activities/Intended Participants/Timelines
	Yes	No			

## THEME 4: LINKS AMONG SCHOOLS, FAMILIES, AND COMMUNITIES

### Migrant Health & Support Service Activities

Year 3 (July 1, 2004 – June 30, 2005)					
2003-2004 Evaluation (Year 2)			Revisions for the 2004-2005 Plan (Year 3)		
2003-2004 Objectives	Met?		Accomplishments/Progress made/Need for Change	Revised Objectives/New Objectives	Activities/Intended Participants/Timelines
	Yes	No			

## THEME 5: IDENTIFICATION AND RECRUITMENT

Year 3 (July 1, 2004 – June 30, 2005)					
2003-2004 Evaluation (Year 2)			Revisions for the 2004-2005 Plan (Year 3)		
2003-2004 Objectives	Met?		Accomplishments/Progress made/Need for Change	Revised Objectives/New Objectives	Activities/Intended Participants/Timelines
	Yes	No			

## THEME 5: FUNDING AND GOVERNANCE

### Budget Development/Monitoring Expenses

#### Year 3 (July 1, 2004 – June 30, 2005)

Developing the District Migrant Education Budget: *Describe the process used to develop the district Migrant Education budget including the coordination/communication and review by the parent advisory council, program and fiscal staff to ensure that the program activities are aligned with the budget and the availability of funds from other Federal, State, and local programs. The LEA must take into account the availability of other funds that a local operating agency may leverage to provide services to migrant children. The LEA may examine the funding levels of programs that the local operating agency conducts and that are available to migrant children, or evaluate the availability of other Federal, State, or local funds by collecting data on per-pupil expenditures. Alternatively, a LEA may consider this factor by collecting data on the programs and/or services that are available and offered to migrant children in a local operating agency.*

**Amendments and Revisions:** *Describe the process(es) and purpose(s) to revise and or amend the Migrant Education budget. Include a description of the coordination/communication and review by the parent advisory council, program and fiscal staff to ensure that the program activities are aligned with the purpose of the amended/revised budget.*

<b>Monitoring Schedule:</b> <i>Describe how and when expenditures are monitored (e.g., weekly, monthly, etc.).</i>	Staff Name and Title Responsible for Monitoring Activities

Refer to the Guidance Document.

**BUDGET PAGE**  
**REGIONAL MIGRANT EDUCATION PROGRAM**  
**Year 3 (July 1, 2004 – June 30, 2005)**

The budget is required to be submitted on the ME-1/ME-3.

If you have any questions as to the appropriate format/content, consult (a) your regional director, (b) the updated MEP Fiscal Requirements Manual, and/or (c) the CDE fiscal consultant assigned to your region.

Refer to the Guidance Document.

### Documentation of Coordination and Collaboration

Enter the names and corresponding information for the **individuals/stakeholders** (e.g., parents, administrators, teachers, other school personnel, community members, students, etc.) **involved** in the **planning, development, and review** of the district service agreement. In compliance with Ed. Code Section 54444.4, NCLB Title I/Part C, and Section 1304(b)(1)(C)(5)(c)B(3)(A)(B), the collaboration reflected on this page should help ensure the availability of funds from other state and local programs. The LEA must take into account the availability of other funds that a local operating agency may leverage to provide services to migrant children. The LEA may examine the funding levels of programs that the local operating agency conducts and that are available to migrant children, or evaluate the availability of other Federal, State, or local funds by collecting data on per-pupil expenditures. Alternatively, a LEA may consider this factor by collecting data on the programs and/or services that are available and offered to migrant children in a local operating agency.

**Parent Involvement:** *The Migrant Education Program also requires “appropriate consultation” with state and local-level PACs in the planning and operation of state and local programs and projects of one school year duration Ed. Code Section 54444.4 (1304(c)(3)), NCLB Title I/Part C.*

Name	Position/Title	Institution

# **REGIONAL ORGANIZATIONAL CHART**

**Regional Migrant Education Parent Advisory Council**  
**Year 3 (July 1, 2004 – June 30, 2005)**  
**MEMBERSHIP ROSTER**

Region: \_\_\_\_\_

Date of last general election for membership  
in Regional Migrant Parent Advisory Council: \_\_\_\_\_

At least two thirds (2/3) of the members of the Parent Advisory Council shall be parents of migrant children. Ed. Code 54444.2(a)(1)

**Membership Categories:**  
representative

**MP** = Migrant Parent

**S** = Student

**CM** = Community Member

**SPAC** = State PAC

T = Teacher

**A** = Administrator

**OSP** = Other School Personnel

Typed or Printed Name of All Council Members	Membership Category (See categories above, check one)							Indicate whether this person is an officer by entering the name of the office held.
	*MP	SPAC	S	CM	T	A	OSP	
								President
								Vice President
Totals								

***\*Parents of migrant students with a current COE. Note: Signature of District Advisory Council President or Executive Board Officer shall sign application or designate Vice President or other Executive Officer. In the absence of officers, a majority (50% + 1 PAC membership) shall vote a designated signatory member. Documentation of vote must be provided along with the application.***